10/601598

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

JENG3003/EM

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                               |   |  |                                    |                                |                |                             |     |        | SMALL ENTITY TYPE      |            |                     | OTHER THAN<br>OR SMALL ENTITY |  |
|--|---|--|------------------------------------|--------------------------------|----------------|-----------------------------|-----|--------|------------------------|------------|---------------------|-------------------------------|--|
| TOTAL CLAIMS   |   |  |                                    |                                | (Octobrit 2)   |                             |     |        | J                      | OR<br>I I  |                     |                               |  |
|  |   |  | 9                                  |                                |                |                             |     | ATE    | FEE                    |            | RATE                | FEE                           |  |
| FOR  |   |  | NUMBER FILED                       |                                | NUMBER EXTRA   |                             | BAS | IC FEE | 375.00                 | OR         | BASIC FEE           | 750.00                        |  |
| TOTAL CHARGEABLE CLAIMS  |   |  | 9 minus 20=                        |                                | · (0)          |                             | ×   | \$ 9=  |                        | OR         | X\$18=              |                               |  |
| INDEPENDENT CLAIMS   |   |  | / minus 3 =                        |                                | <i>b</i>       |                             | X   | 42=    |                        | OR         | X84=                |                               |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |  |                                    |                                |                |                             | +1  | 40=    |                        | OR         | +280=               |                               |  |
| * If the difference in column 1 is less than zero, enter "0" in o            |   |  |                                    |                                |                | olumn 2                     | TC  | TAL    |                        | OR         | TOTAL               | 250                           |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)                 |   |  |                                    |                                |                |                             |     | IALL   | ENTITY                 | OR         | OTHER<br>SMALL I    |                               |  |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY   | PRESENT<br>EXTRA            | R   | ATE    | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE        |  |
|  | Total   | . 9  | Minus                              | - 2                            | 00             | =                           | ×   | \$ 9=  |                        | OR         | X\$18=              | 1                             |  |
|  | Independent   | * /  | Minus                              | *** 3                          | CLAIM          | = /                         | ×   | 42=    |                        | OR         | X84=                | /!                            |  |
|  |   |  |                                    |                                |                |                             |     | 40=    |                        | OR         | +280=               |                               |  |
| TCGA   |   |  |                                    |                                |                |                             |     |        | l                      | OR         | TOTAL<br>ADDIT, FEE |                               |  |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) |   |  |                                    |                                |                |                             |     |        |                        |            |                     |                               |  |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>.AMENDMENT |                                    | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY : | PRESENT<br>EXTRA            | R   | ATE    | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE        |  |
|  | Total   | *  | Minus                              | **                             |                | e .                         | X   | 9=     |                        | OR         | X\$18=              |                               |  |
|  | Independent   | •  | Minus                              | ***                            |                | =                           | ×   | 42=    |                        | OR         | X84=                |                               |  |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |                                    |                                |                |                             |     | 40=    |                        |            | +280=               |                               |  |
|  |   |  |                                    |                                |                |                             |     | TOTAL  |                        | OR         | TOTAL               |                               |  |
| ADDIT, FEE   |   |  |                                    |                                |                |                             |     |        |                        | OR         | ADDIT. FEE          |                               |  |
|  |   | (Column 1)                                 |                                    | (Colur                         |                | (Column 3)                  |     |        |                        |            |                     |                               |  |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY   | PRESENT<br>EXTRA            | R   | ATE    | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE        |  |
|  | Total   | *  | Minus                              | **                             |                | =                           | X   | 9=     |                        | OR         | X\$18=              |                               |  |
|  | Independent   | *  | Minus                              | ***                            |                |                             | ×   | 12=    |                        | OR         | X84=                |                               |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |                                    |                                |                |                             |     | 40=    |                        | OR         | +280=               |                               |  |
| .•   | f the entry in colu<br>f the "Highest Nu  | mn 1 is less than the                      | ne entry in colu<br>aid For IN THI | mn 2, write                    | "O" in col     | umn 3.<br>n 20. enter "20 ' |     | TOTAL  |                        | <b>0</b> 0 | TOTAL               |                               |  |
| ***  | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |                                    |                                |                |                             |     |        |                        |            |                     |                               |  |